

## CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	COMMITTEE	LOBBYIST												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <u>Friends of Sean Kilkenny</u>																		
STREET ADDRESS <u>715 Washington Lane</u>																		
CITY <u>Jenkintown</u>		STATE <u>PA</u>		ZIP CODE <u>19046</u>														
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION												
1. 6TH TUESDAY PRE-PRIMARY		Sheriff		46	D	MO. DAY YEAR 11 3 2015												
2. 2ND FRIDAY PRE-PRIMARY																		
3. 30 DAY POST-PRIMARY																		
4. 6TH TUESDAY PRE-ELECTION																		
5. 2ND FRIDAY PRE-ELECTION																		
6. 30 DAY POST-ELECTION																		
7. ANNUAL REPORT																		
		DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY												
		<table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>11</td> <td>24</td> <td>15</td> </tr> </table> TO <table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>12</td> <td>31</td> <td>15</td> </tr> </table>		MO.	DAY	YEAR	11	24	15	MO.	DAY	YEAR	12	31	15			
MO.	DAY	YEAR																
11	24	15																
MO.	DAY	YEAR																
12	31	15																
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>																
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																
		<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> </tr> </table>		AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO									
AMENDMENT REPORT?	YES	NO																
TERMINATION REPORT?	YES	NO																

## AFFIDAVIT SECTION

## PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS	Notarial Seal
26 DAY OF January	Dianna DiIullo, Notary Public
	Notary Boro, Montgomery County
	My Commission Expires March 16, 2016
SIGNATURE	SIGNATURE OF PERSON SUBMITTING REPORT
<u>[Signature]</u>	<u>Sean Kilkenny</u>
MY COMMISSION EXPIRES	PRINTED NAME
3 16 2016	267 6256343
MO. DAY YR.	AREA CODE DAYTIME TELEPHONE NUMBER

## PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS	
DAY OF 20	SIGNATURE OF CANDIDATE
	PRINTED NAME
SIGNATURE	
MY COMMISSION EXPIRES	AREA CODE DAYTIME TELEPHONE NUMBER
MO. DAY YR.	